

SANDY CITY EMPLOYMENT APPLICATION

Please type or print clearly in ink. To ensure full consideration, application must be completed, including required dates and all job related education and experience. The information you provide will be used to determine if you meet the minimum qualifications. If a question does not apply, enter "NA". Assistance is available for the disabled if help is needed with the application/hiring process. Sandy City is an Equal Opportunity Employer.



APPLICANT INFORMATION

Name (last, first, MI):	Email:
Other names previously used:	Phone:
Current Address: Daytime Evening	
<div style="display: flex; justify-content: space-between;">StreetCityStateZip</div>	
If you have a relative(s) working for Sandy City, indicate name, relationship & department:	
Are you prevented from lawfully becoming employed in this country? Yes ____ No ____	
Do you have a valid Driver's License? Yes ____ No ____ Do you have a valid Commercial Driver's License? Yes ____ No ____	Are you claiming Veteran's Employment Rights? Yes ____ No ____ <i>*If Yes, you must attach a copy of form DD-214.</i>
Have you ever been convicted of a felony? Yes ____ No ____ <i>*Criminal conviction is not an absolute bar from employment, but it will be considered in relation to specific job duties.</i> If yes, please provide date, location, penalty and details for each occurrence.	

JOB INTEREST

Position applying for:	
Type of employment acceptable: Full-time ____ Part-time ____ Seasonal ____	
Date available to start: _____ Minimum acceptable salary: \$ _____ Per: <input type="checkbox"/> Hourly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually	
Have you ever been employed by Sandy City? Yes ____ No ____ If yes, From: _____ To: _____	
Department:	Position:
Supervisor:	Reason for Termination:

REFERENCES

List three personal references (not former supervisors or relatives):			
Name	Title/Occupation	Address (City, State)	Telephone
1. _____			
2. _____			
3. _____			
Are you willing to have your present employer contacted regarding your qualifications? Yes ____ No ____			

EXPERIENCE

Beginning with your present or most recent job, describe all periods of employment, such as paid (full or part-time), volunteer (full or part-time), self-employment, and/or military service. Account for time during any intervals of unemployment other than when attending school. Attach additional sheets if necessary.

Employer:	From:	To:
Complete Address:	Telephone:	
Supervisor's name and title:	Salary: \$	Per:
Your title:	Hours per week:	
Duties:		
Reason for leaving or seeking other employment:		

Employer:	From:	To:
Complete Address:	Telephone:	
Supervisor's name and title:	Salary: \$	Per:
Your title:	Hours per week:	
Duties:		
Reason for leaving or seeking other employment:		

Employer:	From:	To:
Complete Address:	Telephone:	
Supervisor's name and title:	Salary: \$	Per:
Your title:	Hours per week:	
Duties:		
Reason for leaving or seeking other employment:		

TYPING WORDS PER MINUTE (WPM)

If the position you are applying for requires a typing speed, please indicate your typing speed here: WPM: _____

TRAINING

Have you graduated from high school or received an equivalency diploma (GED)? Yes_____ No_____

If no, circle last grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

CERTIFICATES: List job related professional or trade licenses, certificates or registrations:

Title:State:No.:

Title:State:No.:

EDUCATION

Name & location (city) of any college, university, business, trade or technical school.	Official Major	Number of credits earned	Dates of Attendance	Did you Graduate	Type of Degree
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

QUALIFICATIONS

Explain how you meet the minimum EDUCATION, EXPERIENCE, KNOWLEDGE, SKILLS and ABILITY requirements listed in the job description. (Attach additional pages if necessary.)

I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE, AND THAT ANY MISSTATEMENT OF MATERIAL FACTS MAY SUBJECT ME TO DISQUALIFICATION OR DISMISSAL.

Signature/Date: _____

PLEASE COMPLETE THE AUTHORIZATION AND RELEASE ON THE BACK SIDE OF THIS FORM

READ CAREFULLY BEFORE SIGNING BELOW

The following AUTHORIZATION AND RELEASE has been prepared to expedite background inquiries on employment applicants. You are not required to sign this form in order to have your application considered. However, failure to sign may impede the ability of the City to obtain information pertinent to your qualifications for employment.

AUTHORIZATION AND RELEASE

I, _____, hereby specifically authorize and direct any previous or current employers to release to the Human Resources Director of Sandy City, or his/her designee, any and all information of whatever kind possessed by them, in either verbal or written form, as Sandy City may request regarding myself, including opinions as to job performance, character, competency, honesty, ability, work injuries and safety record, and any records related to me personally, which may have been kept either public or private.

I hereby release Sandy City and its officers, agents, and employees from any liability for the use of any and all of the foregoing information, in consideration for being reviewed for the aforesaid position. I further release any previous or current employers from liability or damage which may result from furnishing the information requested. I also request that a copy of this release be treated as conveying the same authority as the signed original.

Signature/Date: _____

Please return all completed applications to:

***Sandy City Human Resources Office
10000 S. Centennial Parkway, Suite 310
Sandy, UT 84070***

Phone: (801) 568-7151
Fax: (801) 568-6076

Website: www.sandycity.jobs
Email: hr@sandy.utah.gov

APPLICANT DATA RECORD

The information requested on this sheet is voluntary. This information will assist the City in applicant tracking, reporting, and other legal requirements. Failure to answer will not impact our consideration of your application. This information is used for statistical purposes only and will not be attached to your application.

1. Race ☐ American Indian
 ☐ Asian/Pacific Islander
 ☐ Black
 ☐ Hispanic
 ☐ White

2. Sex ☐ Male ☐ Female

3. Disabled ☐ Yes ☐ No

4. Veteran ☐ Yes ☐ No

5. Disabled Vet. ☐ Yes ☐ No

6. Over 40 ☐ Yes ☐ No

7. How did you find out about this position?
 ☐ Sandy City Website ☐ Job Interest Card/Email
 ☐ Newspaper ☐ City Hotline
 ☐ Job Services ☐ City Announcement
 ☐ City Employee ☐ College Placement Center
 ☐ Other (please specify) _____